



Nathan Deal, Governor

Clyde L. Reese III, Esq., Commissioner

2 Peachtree Street, NW | Atlanta, GA 30303-3159 | 404-656-4507 | www.dch.georgia.gov

MEMORANDUM

Date: January 8, 2014

To: Chief Executive Officer
Chief Financial Officer

From: John Upchurch
Director, Reimbursement Services
Division of Financial Management

Subject: FY 2014 Interim Disproportionate Share Hospital (DSH) Payments

BY ELECTRONIC MAIL

This is notification that the Department of Community Health (the Department) will issue interim SFY2014 DSH payments to state-owned and non-state governmental owned hospitals. Most hospitals will receive an interim payment equal to 50% of their SFY2013 DSH payment. There are a small number of hospitals that are projected to have significantly lower DSH payments in 2014 versus 2013 per the results of their latest DSH survey. Those hospitals will receive an interim payment equal to 25% of their 2013 DSH payment. Please note the Department used hospitals' eligibility based on last year's qualifications. After review of survey data, if a facility is deemed ineligible to receive such funds an immediate repayment would be due from the facility.

It is important to note that this initial payment is an interim estimate only. When a final payment amount has been determined, an additional payment could then be issued for the difference. In the event that the interim payment should exceed the final payment amount, an immediate repayment would be due from the hospital for the excess amount. The Department will be able to proceed with issuing an interim payment only if an intergovernmental transfer, equal to the matching funds needed to obtain the federal DSH funds, can be provided by the hospital authority or other governmental entity in which the hospital is affiliated.

Detailed information about the time schedule, facility payment amounts and intergovernmental transfers is attached. This information will be available within the next two weeks on the Department's web site at www.dch.ga.gov by selecting options for "Provider," "Provider Types," "Hospital Providers," then "Indigent Care Trust Fund."

As indicated on the attached, interim payments are scheduled to be made on January 24, 2014. Please note that the required intergovernmental transfer must be received by 12 p.m. on January 15, 2014, for an interim payment to be issued. In order to assure that the timely receipt of Intergovernmental transfer can be confirmed, a Notice of Intent to Transfer form must be submitted by January 13, 2014, to document the expected method of transfer.

The interim DSH payment to governmental hospitals will be issued by Electronic Funds Transfer (EFT) to the bank account previously used for DSH or Upper Payment Limit disbursements to your facility. Typically, there is a 2 or 3 day delay between when the funds are disbursed by EFT and when the funds are deposited into a provider's bank account. If there has been any change to your hospital's banking information, please provide updated information by completing the attached vendor management form and submit by January 13, 2014, to:

Ms. Lisa Tolbert
ltolbert@dch.ga.gov
Accounting Manager
(404) 651-9177

Also attached is an updated Letter of Agreement form. Before any DSH payments can be made, an updated agreement from each provider must be signed and submitted to the Department. Please review, sign and submit the letter of agreement by January 13, 2014, to:

Ms. Annetta Smith
Supplemental Reimbursement, Program Director
Georgia Department of Community Health
2 Peachtree Street, NW
39th Floor
Atlanta, Georgia 30303-3159

If you have any questions about this notice, please contact Annetta Smith at (404) 463-6669.